Landscape of Plan
Options in
Minnesota



## Stand-Alone Prescription Drug Plans

1-800-MEDICARE TTY 1-877-486-2048 www.medicare.gov



## Minnesota 2007 Medicare Part D Stand-Alone Prescription Drug Plans

Data as of September 12, 2006. Includes all contracts/plans regardless of 2007 approval status. Employer sponsored plans (800 series) are excluded.

			\$0				
			Premium				
			with	Offers			Type of
			Full Low- Income	Variable	Monthly	Annual Drug Deductible	Extra Coverage
	Plan Name (and ID Numbers)			Co-	Drug		
Company Name		Benefit Type					
Aetna Medicare	Aetna Medicare Rx Essentials (S5810-059)	Basic			\$28.90	\$200	Gap
Aetha Medicare	Aetna Medicare Rx Essentiais (35610-059)  Aetna Medicare Rx Plus (S5810-161)	Enhanced	•	•	\$42.80	\$200	
	Aetna Medicare Rx Premier (\$5810-195)			•	\$72.60	\$0 \$0	Commission
Blue Cross and Blue Shield of Minnesota	(	Enhanced		•		\$0 \$265	Generics
	MedicareBlue Rx Option 1 (S5743-001)	Basic	•		\$21.50		
	MedicareBlue Rx Option 2 (S5743-003)	Enhanced		•	\$35.90	\$0	AH = 1
	MedicareBlue Rx Option 3 (S5743-004)	Enhanced			\$110.30	\$0	All Formulary Drugs
CIGNA HealthCare	CIGNATURE Rx Value Plan (S5617-123)	Basic		•	\$29.60	\$265	
	CIGNATURE Rx Plus Plan (S5617-125)	Enhanced		•	\$39.10	\$0	
	CIGNATURE Rx Complete Plan (S5617-195)	Enhanced		•	\$50.90	\$0	Generics
Coventry AdvantraRx	AdvantraRx Value (S5674-032)	Enhanced		•	\$24.40	\$0	
	AdvantraRx Premier (S5674-033)	Basic		•	\$35.70	\$0	
	AdvantraRx Premier Plus (S5674-035)	Enhanced		•	\$47.50	\$0	Generics
EnvisionRx Plus	EnvisionRxPlus Standard (S7694-025)	Basic			\$46.50	\$265	
	EnvisionRxPlus Gold (S7694-059)	Enhanced		•	\$73.50	\$0	Generics
First Health Part D	First Health Select (S5768-072)	Basic		•	\$36.80	\$0	Continus
FOX Insurance Company	Fox Rx Care Choice Plan (S5557-003)	Basic	•	•	\$28.70	\$190	
	Fox Rx Care High Value Plan (S5557-008)	Enhanced		•	\$53.80	\$0	Generics
Health Net	Health Net Orange Option 1 (S5678-056)	Basic	•	•	\$24.30	\$265	Ochencs
	Health Net Orange Option 2 (S5678-055)	Basic	•	•	\$29.00	\$0	
	Health Net Orange Option 3 (S5678-097)	Enhanced	-	•	\$44.10	\$0	Generics
HealthSpring Prescription Drug Plan	HealthSpring Prescription Drug Plan-Reg 25 (S5932-024)	Basic		•	\$26.50	\$265	Generics
Humana Insurance Company	Humana PDP Standard S5884-083 (S5884-083)	Basic	•		\$10.60	\$265	
	Humana PDP Enhanced S5884-023 (S5884-023)		•		Ŧ	\$205	
		Enhanced		•	\$17.10	\$0	0 '
Mada VOLDO DI ANI	Humana PDP Complete S5884-053 (S5884-053)	Enhanced		•	\$71.60		Generics
Medco YOURx PLAN	Medco YOURx PLAN (S5660-025)	Basic		•	\$36.90	\$100	
MEMBERHEALTH	Community Care Rx BASIC (S5803-094)	Basic	•	•	\$24.50	\$265	
	Community Care Rx CHOICE (S5803-162)	Enhanced		•	\$32.50	\$0	
	Community Care Rx GOLD (S5803-242)	Enhanced		•	\$38.90	\$0	Generics
NMHC Group Solutions	NMHC Medicare PDP Gold (S8841-025)	Basic		•	\$30.50	\$0	
Pennsylvania Life Insurance Company	Prescription Pathway Gold Plan Reg 25 (S5597-057)	Enhanced		•	\$22.90	\$0	
	Prescription Pathway Bronze Plan Reg 25 (S5597-090)	Basic	•		\$25.00	\$265	
	Prescription Pathway Platinum Plan Reg 25 (S5597-222)	Enhanced		•	\$43.50	\$0	Generics
RxAmerica	Advantage Star Plan by RxAmerica (S5644-080)	Basic	•	•	\$25.60	\$265	
	Advantage Freedom Plan by RxAmerica (S5644-059)	Basic		•	\$30.30	\$265	
SAMAscript	SAMAScript (S7950-025)	Basic			\$46.90	\$265	
SilverScript	SilverScript (S5601-050)	Basic	•	•	\$22.60	\$265	
	SilverScript Plus (S5601-051)	Enhanced		•	\$31.40	\$0	
	SilverScript Complete (S5601-096)	Enhanced		•	\$35.40	\$0	Generics
Sterling Prescription Drug Plan	Sterling Rx (S4802-030)	Basic		•	\$33.90	\$100	
	Sterling Rx Plus (S4802-058)	Enhanced	1	•	\$58.70	\$100	Generics

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			\$0				
			Premium				
			with	Offers			Type of
			Full Low-	Variable	Monthly		Extra Coverage
			Income	Co-	Drug	Annual Drug	Offered in the
Company Name	Plan Name (and ID Numbers)	Benefit Type	Subsidy?	payments	Premium	Deductible	Gap
Unicare	MedicareRx Rewards Value (S5960-025)	Basic	•	•	\$19.40	\$265	
	MedicareRx Rewards Plus (S5960-061)	Enhanced		•	\$21.50	\$0	
	MedicareRx Rewards Premier (S5960-095)	Enhanced		•	\$33.40	\$0	Generics
United American Insurance Company	UA Medicare Part D Rx Covg - Silver Plan (S5755-063)	Basic			\$32.40	\$265	
	UA Medicare Part D Prescription Drug Cov (S5755-028)	Enhanced		•	\$41.90	\$0	
UnitedHealthcare	AARP MedicareRx Plan - Saver (S5921-247)	Basic	•	•	\$20.10	\$265	
	AARP MedicareRx Plan (S5820-024)	Basic	•	•	\$28.50	\$0	
	UnitedHealth Rx Basic (S5921-248)	Basic		•	\$30.40	\$0	
	UnitedHealth Rx Extended (S5820-128)	Enhanced		•	\$43.30	\$0	
	AARP MedicareRx Plan - Enhanced (S5921-249)	Enhanced		•	\$46.50	\$0	Generics
WellCare	WellCare Classic (S5967-162)	Basic	•	•	\$18.80	\$265	
	WellCare Signature (S5967-059)	Basic	•	•	\$26.80	\$0	
	WellCare Complete (S5967-094)	Enhanced		•	\$39.50	\$0	Generics